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TITLE: Using Behavioral Data to Target Prevention Activities in the Black Community

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BACKGROUND/OBJECTIVES: In the study population of 1777 HIV infected persons in southeast Michigan, 74% are black and 77% are male. Of these black men, 67% are men who have sex with men (MSM), and 36% of these black MSM's also have sex with women (referred to as bisexual). Prior studies have shown that sexual partners tend to be of the same race; consequently, black women are at an increased risk for HIV infection through heterosexual transmission. This paper will examine modes of HIV transmission in southeast Michigan's black community.

METHODS: The Michigan Supplement to HIV/AIDS Surveillance (SHAS) is a cross-sectional study which is comprised of in-depth interviews of HIV and AIDS patients ≥ 18 years of age. Michigan SHAS is demographically representative of the HIV cases in the Detroit area. Information is collected using a standard questionnaire that includes demographic information, socio-economic status, sexual and substance use behaviors, HIV testing behaviors, therapies for HIV and opportunistic illnesses, and access and adherence to therapy.

RESULTS: In the 5 years prior to interview, 22% of black bisexual men have had one male sex partner, 52% have had 2-5 male partners, 16% have had 6-10 male partners, and 10% have had more than 10 male partners. An examination of the same men found that they have a similar number of female sex partners: 28% have had one female sex partner in the five years prior to interview, 50% have had 2-5, 12% have had 6-10, and 10% have had more than 10. Drug use by these men is also common: 47% have used some mind-altering drug(s) other than alcohol. Of those who have used drugs, 60% have used crack and 15% have ever injected drugs. One-third of these injectors injected in the five years prior to SHAS interview.

CONCLUSIONS: Most bisexual black men have more than one male and female sex partner, which puts their partners at higher risk for HIV infection. Additionally, use of injectable drugs by black men further increases risk of transmission. Because many of these men are not current injectors, they may not be considered IDU's by their sex partners. Prevention activities in the black community should be designed to address the most likely modes of transmission. For black men this includes MSM behavior. For black women, this includes heterosexual contact not only with IDU's, as is commonly perceived, but with bisexually active men as well.

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